**REGISTRATION ADVISEMENT FORM and TABLE**

College of Sciences and Engineering

Mechanical Engineering Department

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| --- | --- |
| Student’s Name:  | John Doe |
| SU Banner ID No.: | S00000001 | Telephone No.: | (225) 000-0000 |
| Email Address: | John\_Doe\_00@subr.edu and John\_Doe@gmail.com |  |
| Semester§: | Fall 2021 | Current Date:  | 2/25/2020 – 3:20 PM |

§Semester means the term for which you are registering or pre-registering.

Discussion Points:

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**Recommended courses**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **CRN** | **Course Title** | **Course No.** | **Sec No.** | **Cred. Hrs.** | **Day(s)** | **Time(s)** | **Instructor** |
| *12345* | *Example ME Course Title* | *MEEN 123* | *1* | *3.0* | *MWF* | *07:00 – 07:50 AM* | *John Doe* |
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| **Alternate courses**: |  |  |  |  |  |  |
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| Total Hours Recommended: |  |  |  |  |

Comments:

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**Note**:

The signatures below verify that I have had an advisement conference with my faculty advisor concerning courses I should take during the semester indicated. My advisor has approved the courses listed on the registration form.

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| Student Signature |  | Academic & Career Advisor Signature  |